

**154: PEER REVIEW IN OBSTETRICS AND GYNECOLOGY: EXPERIENCE OF A NATIONAL MEDICAL SPECIALTY ORGANIZATION**

**Authors:**

Gluck P.A., Scarrow P.K.

**Objective:**

Applying objective, well structured peer review to see if hospital size, obstetrical volume or department size affect the quality of OB/GYN care.

**Methods:**

Since 1986, the American College of Obstetricians and Gynecologists (ACOG) has offered voluntary consultative service (Voluntary Review for Quality of Care Program) to assist departments of obstetrics and gynecology in assessing quality of care. This study was done to evaluate the experience of this structured peer review program to improve quality of care in the individual institution, and to identify common issues indicating knowledge deficits important in developing national, continuing, medical education activities.

The findings and recommendation from the first 100 hospital reviews spanning 10 years, on file with ACOG, were evaluated using a standardized matrix for deficiencies. The deficiencies were grouped within 9 obstetric, 6 gynecologic and 12 system and administrative categories. These results were then tabulated for statistical analysis. Comparisons were made based on hospital size, number of deliveries, and number of obstetricians and gynecologists on staff. Statistical analysis utilized the Statsdirect 1.611 software to determine the Pearson correlation coefficient ( ). Statistical significance ( ) was then calculated by the modified t-test.

**Results:**

Neither the size of the institution nor the volume of patients affected the frequency and nature of quality deficiencies identified. Overall, system and administrative problems were more frequent than clinical concerns. Among the clinical problems, obstetrical issues were more prevalent than gynecologic issues.

**Conclusions:**

Similar cognitive, behavioral and structural issues that adversely affect quality were identified in a diverse cohort of hospitals. Irrespective of size and volume of the hospital reviewed, the incidence of specific quality issues was not statistically different. Specific interventions were recommended to correct these deficiencies. These findings are being used by ACOG to develop educational materials to improve patient care.